



Complete Summary

GUIDELINE TITLE

Parameter on aggressive periodontitis.

BIBLIOGRAPHIC SOURCE(S)

American Academy of Periodontology. Parameter on aggressive periodontitis. J Periodontol 2000 May; 71(5 Suppl):867-9. [34 references]

COMPLETE SUMMARY CONTENT

SCOPE

METHODOLOGY - including Rating Scheme and Cost Analysis

RECOMMENDATIONS

EVIDENCE SUPPORTING THE RECOMMENDATIONS

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

QUALIFYING STATEMENTS

IMPLEMENTATION OF THE GUIDELINE

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT

CATEGORIES

IDENTIFYING INFORMATION AND AVAILABILITY

SCOPE

DISEASE/CONDITION(S)

Aggressive periodontitis including localized and generalized aggressive periodontitis.

GUIDELINE CATEGORY

Assessment of Therapeutic Effectiveness

Evaluation

Treatment

CLINICAL SPECIALTY

Dentistry

INTENDED USERS

Dentists

GUIDELINE OBJECTIVE(S)

To provide a parameter on the treatment of aggressive periodontitis.

TARGET POPULATION

All patients with periodontitis who otherwise appear healthy.

INTERVENTIONS AND PRACTICES CONSIDERED

1. Oral hygiene instruction, reinforcement, and evaluation of patient's plaque control
2. Supra- and subgingival scaling and root planning
3. Control of local factors
4. Occlusal therapy
5. Periodontal surgery
6. Periodontal maintenance

MAJOR OUTCOMES CONSIDERED

Efficacy of therapy, as noted by changes in:

- Gingival inflammation
- Tooth mobility
- Probing depths
- Clinical attachment
- Osseous lesions
- Occlusal stability
- Plaque level

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Not stated

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Not stated

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not applicable

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Internal Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

Approved by the Board of Trustees, American Academy of Periodontology, May 1998.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Therapeutic Goals

The goals of periodontal therapy are to alter or eliminate the microbial etiology and contributing risk factors for periodontitis, thereby arresting the progression of disease and preserving the dentition in a state of health, comfort, and function with appropriate esthetics; and to prevent the recurrence of periodontitis. In addition, regeneration of periodontal attachment apparatus, where indicated, may be attempted. Due to the complexity of the aggressive periodontal disease with regard to systemic factors, immune defects and the microbial flora, control of disease may not be possible in all instances. In such cases, a reasonable treatment objective is to slow the progression of the disease (see the Parameter of Refractory Periodontitis).

Treatment Considerations

In general, treatment methods for the aggressive periodontal diseases may be similar to those used for adult periodontitis (see Parameter on Chronic Periodontitis With Advanced Loss of Periodontal Support). These methods should include oral hygiene instruction and reinforcement and evaluation of the patient's plaque control; supra- and subgingival scaling and root planing to remove microbial plaque and calculus; control of other local factors; occlusal therapy as necessary; periodontal surgery as necessary; and periodontal maintenance.

In addition to the parameters for Chronic Periodontitis, the following should be considered for patients who have aggressive periodontitis:

1. A general medical evaluation may determine if systemic disease is present in children and young adults who exhibit severe periodontitis, particularly if aggressive periodontitis appears to be resistant to therapy. Consultation with the patient's physician may be indicated to coordinate medical care in conjunction with periodontal therapy. Modification of environmental risk factors should be considered.
2. Initial periodontal therapy alone is often ineffective. However, in the early stages of disease, lesions may be treated with adjunctive antimicrobial therapy combined with scaling and root planing with or without surgical therapy. Microbiological identification and antibiotic sensitivity testing may be considered. In very young patients, the use of tetracyclines may be contraindicated due to the possibility of staining of teeth. Alternative antimicrobial agents or delivery systems may be considered.
3. The long-term outcome may depend upon patient compliance and delivery of periodontal maintenance at appropriate intervals, as determined by the clinician (see the Parameter on Periodontal Maintenance). If primary teeth are affected, eruption of permanent teeth should be monitored to detect possible attachment loss.
4. Due to the potential familial nature of aggressive diseases, evaluation and counseling of family members may be indicated.

Outcomes Assessment

The desired outcomes of periodontal therapy in patients with aggressive periodontitis should include:

1. Significant reduction of clinical signs of gingival inflammation
2. Reduction of probing depths
3. Stabilization or gain of clinical attachment
4. Radiographic evidence of resolution of osseous lesions
5. Progress toward occlusal stability
6. Progress toward the reduction of clinically detectable plaque to a level compatible with periodontal health.

Areas where the periodontal condition does not resolve may occur and be characterized by the presence of:

1. Persistent gingival inflammation
2. Persistent or increasing probing depths
3. Progressive loss of clinical attachment

4. Persistent clinically detectable plaque levels not compatible with periodontal health
5. Increasing tooth mobility

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of supporting evidence is not specifically stated for each recommendation.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

- Alteration or elimination of the microbial etiology and contributing risk factors for periodontitis to arrest or slow the progression of the disease
- Preserving the dentition in a state of health, comfort, and function with appropriate esthetics
- Prevention of disease recurrence

POTENTIAL HARMS

Not stated

QUALIFYING STATEMENTS

QUALIFYING STATEMENTS

1. Each parameter should be considered in its entirety. It should be recognized that adherence to any parameter will not obviate all complications or post-care problems in periodontal therapy. A parameter should not be deemed inclusive of all methods of care or exclusive of treatment appropriately directed to obtain the same results. It should also be noted that these parameters summarize patient evaluation and treatment procedures which have been presented in more detail in the medical and dental literature.
2. It is important to emphasize that the final judgment regarding the care for any given patient must be determined by the dentist. The fact that dental treatment varies from a practice parameter does not of itself establish that a dentist has not met the required standard of care. Ultimately, it is the dentist who must determine the appropriate course of treatment to provide a reasonable outcome for the patient. It is the dentist, together with the patient, who has the final responsibility for making decisions about therapeutic options.

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness
Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

American Academy of Periodontology. Parameter on aggressive periodontitis. J Periodontol 2000 May; 71(5 Suppl):867-9. [34 references]

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

1996 Oct (revised 2000 May)

GUIDELINE DEVELOPER(S)

American Academy of Periodontology - Professional Association

SOURCE(S) OF FUNDING

American Academy of Periodontology

GUIDELINE COMMITTEE

Ad Hoc Committee on Parameters of Care

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Members: Donald A. Adams; Erwin P. Barrington (Chair); Jack Caton, Jr.; Robert J. Genco; Stephen F. Goodman; Carole N. Hildebrand; Marjorie K. Jeffcoat; Fraya Karsh; Sanford B. King; Brian L. Mealey; Roland M. Meffert; James T. Mellonig; Myron Nevins; Steven Offenbacher; Gary M. Reiser; Louis F. Rose; Paul R. Rosen; Cheryl L. Townsend (Chair); S. Jerome Zackin.

FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

GUIDELINE STATUS

This is the current release of the guideline. It is an update of a previously issued document (Parameters of care. Chicago (IL): American Academy of Periodontology; 1996 Oct. 41-5 [29 references]).

This publication has been edited to reflect decisions by the Board of Trustees in approving the term "periodontal maintenance" in lieu of "supportive periodontal therapy" (January 2000) and a new classification of periodontal diseases, as published in the Annals of Periodontology, December 1999; Volume 4, Number 1 (April 2000).

An update is not in progress at this time.

GUIDELINE AVAILABILITY

The complete set (13 parameters) of the American Academy of Periodontology Parameters of Care can be downloaded from the Academy's Web site. An Adobe Acrobat Reader is required to download the publication.

To access the Academy's Web site, go to www.perio.org. To access a copy of the Parameters of Care, go to www.perio.org/resources-products/pdf/parameters.pdf.

AVAILABILITY OF COMPANION DOCUMENTS

This is one of 13 practice parameters available in the American Academy of Periodontology Parameters of Care. This journal supplement includes a Foreword and an Overview.

To access the Academy's Web site, go to www.perio.org. To access a copy of the Parameters of Care, go to www.perio.org/resources-products/pdf/parameters.pdf.

PATIENT RESOURCES

None available

NGC STATUS

This is an update of a previously issued summary that was originally completed by ECRI on March 25, 1999, was verified by the guideline developer on April 26,

1999, and was published to the NGC Web site in May 1999. The updated summary was verified by the guideline developer as of October 17, 2000.

COPYRIGHT STATEMENT

This NGC summary is based on the original guideline, which is copyrighted by the American Academy of Periodontology.

© 1998-2004 National Guideline Clearinghouse

Date Modified: 11/15/2004

The logo for FIRST GOV, with "FIRST" in blue and "GOV" in red, separated by a small graphic.

